

NOV 07 2006

PTO/SB/17 (07-06)

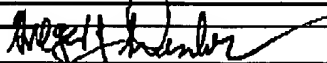
Approved for use through 01/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/03/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known Application Number 09/546,399-Conf. #2277 Filing Date April 10, 2000 First Named Inventor Richard HULL et al. Examiner Name M. A. Moran Art Unit 1631	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No. 0290065.00120US1	
TOTAL AMOUNT OF PAYMENT (\$) 130.00			

METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 08-0219 Deposit Account Name: Wilmer Cutler Pickering Hale and Dorr LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description	Fee (\$)	Small Entity Fee (\$)					
Each claim over 20 (including Reissues)	50	25					
Each independent claim over 3 (including Reissues)	200	100					
Multiple dependent claims	360	180					
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>			
HP = highest number of total claims paid for, if greater than 20.			<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
- 100 = /50 (round up to a whole number) x							
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 2814 Statutory Disclaimer (2)				130.00			

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	42,488
Name (Print/Type)	Gregory S. Discher	Telephone	(202) 663-8000
		Date	September 13, 2006

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Date November 7, 2006

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To Examiner Marjorie A. Moran

Fax 571.273.8300
Tel 571.272.0720

cc

From Gregory S. Discher

Pages (including cover)
8

Re Application No. 09/546,399

Dear Examiner Moran:

Attached please find the filing made on September 13, 2006 for the above-referenced application.

If you need any additional information pertaining to this matter, please contact Greg Discher at (202) 663-6042.

Sincerely,

Connie Sisk
Phone: (202) 247-2391
Assistant to Mr. Gregory Discher

Attachment

Wilmer Cuder Pickering Hale and Dorr LLP, 1600 Tysons Boulevard, Suite 1000, McLean, Virginia 22102

Baltimore Beijing Berlin Boston Brussels London Munich New York Northern Virginia Oxford Palo Alto Waltham Washington

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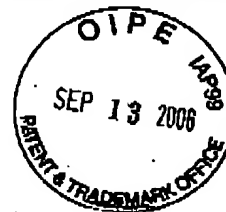
Wilmer Cutler Pickering Hale and Dorr LLP
1875 Pennsylvania Avenue, NW
Washington, DC 20006
202.663.6000
GSD/vyw

Applicant(s): **Richard HULL et al.**Filing Date: **April 10, 2000**Art Unit: **1631**Entitled: **CHEMICAL STRUCTURE SIMILARITY RANKING SYSTEM AND COMPUTER-IMPLEMENTED METHOD FOR SAME**Application No.: **09/546,399**Atty Docket No.: **290065.120US1**Examiner: **M. A. Moran**

RECEIPT IS ACKNOWLEDGED FOR THE FOLLOWING:

- ☒ Transmittal (1 page)
- ☒ Fee Transmittal (1 page)
- ☒ Response Under 37 C.F.R. § 1.111 (2 pages)
- ☒ Terminal Disclaimer (2 pages)
- ☒ Authorization to Charge Deposit Account No. 08-0219 in the amount of \$160.00.

Date: September 13, 2006



NOV 07 2006

PTO/SB/21 (07-08)


Approved for use through 09/30/2008. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/546,399-Conf. #2277
	Filing Date	April 10, 2000
	First Named Inventor	Richard HULL et al.
	Art Unit	1631
	Examiner Name	M. A. Moran
Total Number of Pages in This Submission	Attorney Docket Number	0290065.00120US1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer (2) <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	WILMER CUTLER PICKERING HALE AND DORR LLP		
Signature			
Printed name	Gregory S. Discher		
Date	September 13, 2006	Reg. No.	42,488